

RESPONSE UNDER 37 CFR 1.116 EXPEDITED PROCEDURE

IN THE U.S. PATENT AND TRADEMARK OFFICE

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NOV 03 2004

November 3, 2004

Applicant(s): Jakob MAIER, Jr.

For: FLEXIBLE MILK HOSE FOR AN AUTOMATIC MILKING PLANT

Serial No.: 10/031 864

Group: 3644

Confirmation No.: 8541

Filed: June 5, 2002

Examiner: J. Lofdahl

International Application No.: PCT/EP00/04281

International Filing Date: May 11, 2000

Atty. Docket No.: GKS C-373

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE UNDER 37 CFR 1.116 EXPEDITED PROCEDURE

Sir:

In response to the Office Action dated August 5, 2004,
please amend the above-identified application as follows:

(Please see following pages.)

NOV 03 2004

From: FLYNN, THIEL, BOUTELL & TANIS, P.C. - VIA FACSIMILE
2026 Rambling Road TOTAL PAGES 23
Kalamazoo, Michigan 49008-1631 U.S.A.
Telephone 269-381-1156
Facsimile 269-381-5465

Date: November 3, 2004

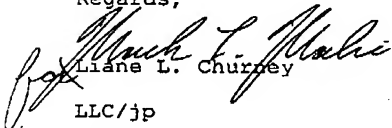
To: UNITED STATES PATENT AND TRADEMARK OFFICE
Attention: Examiner Lofdahl
FACSIMILE NO. - (703) 872-9306

Re: Applicant : Jakob MAIER, Jr.
For : FLEXIBLE MILK HOSE FOR AN
AUTOMATIC MILKING PLANT
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Filed : June 5, 2002
Our Ref. : GKS C-373

As soon as this Response has been received, kindly notify
Examiner Jordan Lofdahl at 703-605-1217 that same is available
for his consideration.

Thank you.

Regards,


Liane L. Churney

LLC/jp

Encl.: Amendment Transmittal (in duplicate)
Response Under 37 CFR 1.116 Expedited Procedure

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper and the above-listed
enclosures (if any) is being facsimile transmitted to the
Patent and Trademark Office on the date shown below.

Signature 
Patricia C. Quinn

Date

11-3-04

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Sir:

Herewith is an amendment in the above-identified application.

☐ Applicant claims small entity status. See 37 CFR 1.27.☐ The additional filing fee has been calculated as shown below:

For	No. Filed	No. Extra	() LG Entity	RATE () SM Entity	Fee
Basic Fee			\$790.00	\$395.00	\$0.00
Total Claims	(16 - 20 = 0)		x \$ 18.00	x \$ 9.00	0.00
Indep. Claims	(2 - 3 = 0)		x \$ 88.00	x \$ 44.00	0.00
<input type="checkbox"/> Multiple Dep. Claim			+ \$300.00	+ \$150.00	0.00
* * * TOTAL FILING FEE * * *					\$ 0.00

☐ Pursuant to 37 CFR 1.136(a), please extend the shortened period for response by _____ month(s). The extension fee is: \$ _____.☐ A Check for \$ _____ is enclosed to cover fees.☒ Please credit any overpayment, or charge any additional filing fee required under 37 CFR 1.16 or 1.17 by this communication, to Deposit Account No. 06-1382. A duplicate copy of this sheet is enclosed.

IN DUPLICATE

LLC/jp


Maureen L. Churney Reg. No. 40 694

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